PTQ/8B/08 (12-04)

U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 52087 APPLICATION AS FILED - PART I (Column 1) OTHER THAN SMALL ENTITY (Column 2) OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIO FEE RATE (\$) FEE (\$) RATE (\$) FEE (\$) 97 OFR 1.10(a), (b), or (c)) 8EARCH FEE 67 OFR 1.16(9, (0, or (m)) EXAMINATION FEE (#Z OFR 1,16(0), (p), or (q)) TOTAL CLAIMS (07 OFR 1.16(1)) minus 20 = × INDEPENDENT CLAIMS OR (87 OFR 1.16(h)) minus 3 = x If the specification and drawings exceed 100 2 x APPLICATION SIZE stiests of paper, the application size fee due is \$250 (\$125 for small entity) for each (87 OFR 1.16(a)) additional 50 sheets or fraction thereof. See 35 U.S.O. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (87 CFR 1.16(I)) ullet if the difference in column 1 is less than zero, enter ullet in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3) OTHER THAN OR SMALL ENTITY CLAIMS HIGHEST SMALL ENTITY REMAINING PRESENT NUMBER RATE (\$) AFTER AMENDMENT ADDI-REVIOUSLY RATE (\$) EXTRA . ADDI-AMENDMENT TIONAL FEE (\$) PAID FOR TIONAL Total profe 1.160) Minus 39 FEE (\$) 5000 Independent (37 OFR 1.160-1) OR Minus ×100 = × 2000= Application Size Fee (37 CFR 1,16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (97 CFR 1.16(1)) OR TOTAL TOTAL ADD'L FEE OR: ADD'L FEE (Column 1) (Column 2) (Column 8) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) AFTER MENDMENT ADDI-TIONAL FEE (\$) ADDI-TIONAL RATE (\$) PREVIOUSLY PAID FOR EXTRA 回 Total (17 OFR LING) Minus FEE (\$) x OR Mirus ď Application Size Fee (37 CFR 1.16(s)) **O**R FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (57 OFR 1.16(1)) OR TOTAL ADD'L FEE TOTAL ADD'L FEE * If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.

** If the Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "20".

The Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

**DORESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. OR